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Serial No.: 10/087,217
Patent No: 7,115,377

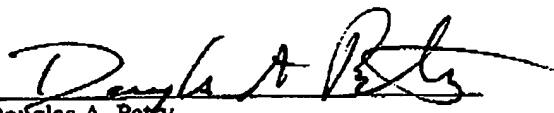
Docket No: P-6497

Please charge Deposit Account No. 02-1666 in the amount of \$810.00 for the deficiency owed. If there are any additional charges in connection with this notification, the Examiner is authorized to charge Deposit Account No. 02-1666 therefor.

Respectfully submitted,

01/27/2010

Date


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